Mailing Add	TAINABLE GROWTH INTA  TO DOX 2063 GARDIVERVILL  dress (Include city and zip code)	E NV 89410  Telephone No.
E-Mail Add	ress	× .
Select Ap	propriate Box(es) CANDIDATE PAC BAG POLPRTY	□ind.exp:□amended: □ annual filing
	Annual Filing - Due January 15, 2004 Period: January 1, 2003 - December 31, 2003	FILE
Incumbent All others	Report #1 — Due August 31, 2004 s in an Office with a 4-year term s in an Office with a 6-year term or an an Office with a 6-year term period: Period: Period: Jan. 1, 2004 — Aug. 26, 2004 period: Period: Dec. 5, 2002 — Aug. 26, 2004 period: Dec. 5, 2002 — Aug. 26, 2004	DEAN HELLER
Ø	Report #2 Due — October 26, 2004 Period: Aug. 27, 2004 — Oct. 21, 200	FOR OFFICE USE ONLY
BAGs onl	Report #3 Due — January 15, 2005*         Period:       Oct. 22, 2004 — Dec. 31, 200         y:       Period:       Oct. 22, 2004 - Dec. 5, 2004	
☐ * Third I	Annual Filing – Due January 15, 2005 Period: January 1, 2004 – December 31, 2004 Report suffices for 2005 Annual Filing If candidate also filed	Report Nos. 1 and 2
	CONTRIBUTIONS SUMMARY	Cumulative From Beginning of Report Period #1 through End of This Reporting Period
1.	Total Monetary Contributions Received in Excess of \$100	875.00 15,658.35
2.	Total Monetary Contributions Received of \$100 or Less	875.00 15,658.33
		umulative From legiming of teport Period #1 trough End of his Reporting Period
3.	Total Amount of Monetary Contributions Received	
4.	(Add Lines 1 and 2)	875.00 26,938.35 8,907.68
and the second second	EXPENSES SUMMA	RY
5	. Total Monetary Expenses Paid in Excess of \$100	2,000.00 34,656.07
6 7	. Total Monetary Expenses Paid of \$100 or Less . Total Amount of All Monetary Expenses Paid (Add Lines 5 and 6)	2,000.00 34,656.07
8	Total Value of In Kind Expenses in Excess of \$100	18,907.68
	AFFIRMATIO	en series de la companya de la comp Na companya de la co
l Decla	re Under Penalty of Perjury That the Foregoing is True and Corr	ect.

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# 2

SUSTAINABLE	GROWTH	INITIATIVE
Name (print)	Office	e (if applicable)

Office (if applicable)

District (if applicable)

## Expenses in Excess of \$100 Transfer Total Amount of All Campaign Expenses to Line 9 of Expenses Summary

NAME AND ADDRESS OF PERSON, GROUP OR ORGANIZATION WHO RECEIVED THE PAYMENT FOR THE EXPENSE(S)	CATEGORY (See Previous Page) NRS 294A.365	DATE OF EACH EXPENSE	AMOUNT: OF LEACH EXPENSE
BROOKE SHAW ZUMPFT POBON 2860 MINDEN, NV 89423	=	9-15-04	1,000.00
			-
	·		

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GROWTH Sustainable
Name (print)

Office (if applicable)

District (if applicable)

## **Expense Categories**

CATEGORIES	CODE
Office expenses	A
Expenses related to volunteers	В
Expenses related to travel	С
Expenses related to advertising	D
Expenses related to paid staff	E
Expenses related to consultants	F
Expenses related to polling	G
Expenses related to special events	Н
** Goods and services provided in kind for which money would otherwise have been paid	1
Other miscellaneous expenses	J
Expenses related to NRS 294A.160 (Disposition of Unspent Contributions)	K

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<sup>\*\*</sup> NRS 294A.362 requires "In Kind" contributions and expenses to be reported on a separate form, which is attached.